

MAR 01 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of Applicants:

Daniel N. Bauer

Serial No.: 10/535,123

Filed: 11/28/2005

For: Network Traffic Control...

Date: March 1, 2006

Group Art Unit: 2161

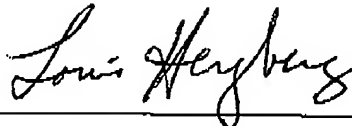
Examiner:

Docket No: CH920020044US1

Commissioner for Patents
Alexandria, VA 22313-1450

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this change of correspondence address application (2 pages total) is being facsimile transmitted under Rule 37 CFR 1.6(d) to the U.S. Patent and Trademark Office, to (571-273-8300), on the date shown above.



Dr. Louis P. Herzberg

Registration No. 41,500

MAR 01 2006

PTO/SB/122 (08-03)

Approved for use through 11/30/2005. OMB 0851-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application		Application Number: <u>10/532,123</u>	
Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.		Filing Date: <u>11/28/2005</u> <u>10/535,123</u>	
		First Named Inventor: <u>Daniel N. Bauer</u>	
		Art Unit: <u>2161</u>	
		Examiner Name:	
		Attorney Docket Number: <u>CH920020044US1</u>	
Please change the Correspondence Address for the above-identified patent application to:			
<input checked="" type="checkbox"/> Customer Number: <u>54856</u>			
OR			
<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City		State	Zip
Country			
Telephone		Fax	
This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).			
I am the:			
<input type="checkbox"/> Applicant/Inventor			
<input type="checkbox"/> Assignee of record of the entire interest.			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> Attorney or Agent of record. Registration Number <u>41,500</u>			
<input type="checkbox"/> Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____			
Typed or Printed Name: <u>Louis P. Herzberg</u>			
Signature <u>Louis Herzberg</u>			
Date <u>March 1, 2006</u>		Telephone <u>(845) 352-3194</u>	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
*Total of _____ forms are submitted.			

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.